

HOLLAND & HART^{LLP}



Jordan L. Kessler
Associate
Phone (505) 988-4421
Fax (505) 983 6043
JKessler@hollandhart.com

December 16 2016

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO AFFECTED PARTIES

Re Amended Application of BC Operating, Inc , Crown Oil Partners V, Crump Energy Partners, and Nadel and Gussman Permian, LLC for a non-standard spacing and proration unit and compulsory pooling, Eddy County, New Mexico Southern Comfort 25-36 State Com X #2H Well

Dear Sir or Madam

This letter is to advise you that BC Operating Inc , Crown Oil Partners V, Crump Energy Partners, and Nadel and Gussman Permian LLC have filed the enclosed amended application with the New Mexico Oil Conservation Division *Your interests are not being pooled under this application You are receiving notice of this application because of the request for the creation of a non-standard spacing and proration unit*

This application has been set for hearing before a Division Examiner at 8 15 AM on January 5 2017 The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive Santa Fe, New Mexico 87505 You are not required to attend this hearing but as an owner of an interest that may be affected by this application you may appear and present testimony Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date

Parties appearing in cases are required by Division Rule 19 15 4 13 B to file a Pre-hearing Statement four days in advance of a scheduled hearing This statement must be filed at the Division's Santa Fe office at the above specified address and should include the names of the parties and their attorneys a concise statement of the case the names of all witnesses the party will call to testify at the hearing the approximate time the party will need to present its case, and identification of any procedural matters that are to be resolved prior to the hearing

If you have any questions about this matter please contact Brandon Gianfala at (432) 253-7725 or bgianfala@bcoperating.com

Sincerely

Jordan L. Kessler
ATTORNEY FOR APPLICANTS

Holland & Hart LLP

Phone (505) 988 4421 Fax (505) 983 6043 www.hollandhart.com

110 North Guadalupe Suite 1 Santa Fe New Mexico 87501 Mailing Address PO Box 2208 Santa Fe NM 87504 2208

A B H C City Colorado Springs Denver District of Columbia Houston Jacksonville Las Vegas Reno Salt Lake City Santa Fe Washington DC

HOLLAND & HART^{LLP}



Jordan L. Kessler
Associate
Phone (505) 988-4421
Fax (505) 983 6043
JKessler@hollandhart.com

December 16 2016

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO ALL INTEREST OWNERS SUBJECT TO POOLING PROCEEDINGS

Re Amended Application of BC Operating, Inc , Crown Oil Partners V, Crump Energy Partners, and Nadel and Gussman Permian, LLC for a non-standard spacing and proration unit and compulsory pooling, Eddy County, New Mexico Southern Comfort 25-36 State Com X #2H Well

Ladies & Gentlemen

This letter is to advise you that BC Operating Inc Crown Oil Partners V, Crump Energy Partners, and Nadel and Gussman Permian LLC have filed the enclosed amended application with the New Mexico Oil Conservation Division This application will be set for hearing before a Division Examiner at 8 15 a m on January 5, 2017 The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive Santa Fe New Mexico 87505 You are not required to attend this hearing but as an owner of an interest that may be affected by this application you may appear and present testimony Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date

Parties appearing in cases are required by Division Rule 19 15 4 13 B to file a Pre hearing Statement four days in advance of a scheduled hearing This statement must be filed at the Division s Santa Fe office at the above specified address and should include the names of the parties and their attorneys, a concise statement of the case, the names of all witnesses the party will call to testify at the hearing the approximate time the party will need to present its case, and identification of any procedural matters that are to be resolved prior to the hearing

If you have any questions about this matter please contact Brandon Gianfala, at (432) 253 7725 or bgianfala@bcoperating.com

Sincerely,

Jordan L. Kessler
ATTORNEY FOR APPLICANTS

Holland & Hart LLP

Phone (505) 988 4421 Fax (505) 983 6043 www.hollandhart.com

110 North Guadalupe Suite 1 Santa Fe New Mexico 87501 Mailing Address PO Box 2208 Santa Fe NM 87504 2208

Aspen Bo Ide Ca so Cty Cl ad Sp ngs De Den erTechC te Bll g Bo Ch yen e J ckso H I Las Vegas R Salt Lak Cty Sa t F Wash gton DC

**BC OPERATING INC
AMENDED SOUTHERN COMFORT 2H**

Pooled Parties

Stillwater Investments
6403 Sequoia
Midland, Texas 79707

Murchison Oil and Gas, Inc
7250 Dallas Pkwy #1400
Plano, TX 75024

Occidental Permian Limited
Partnership
P O Box 50250
Midland, Texas 79710

COG Production LLC
One Concho Center
600 W Illinois Avenue
Midland, Texas 79701

COG Acreage LP
One Concho Center
600 W Illinois Avenue
Midland, Texas 79701

Thomas Family Limited
Partnership
P O Box 80123
Phoenix AZ 85060

BB Management LLC
P O Box 80735
Phoenix AZ 85060

Jim Whitehead Oil & Gas LLC
651 North Sky View St
Flagstaff, AZ 86004

BID Group LLC
P O Box 5045
Scottsdale AZ 85261

Permian Basin Investment
Corporation
1451 S Miami Ave Apt 3604
Miami, FL 33130

L T Capital LLC
P O Box 80735
Phoenix, AZ 85060

Centennial
P O Box 1834
Roswell, NM 88202

Catalyst Energy LLC
10219 Saloth Ave
Phoenix AZ 85041

Levi Oil and Gas LLC
P O Box 568
Agua, NM 88211-0568

Billie J Michaud Trustee of the
Billie J Michaud Revocable Living
Trust dated 6/2/2006
1157 SW 213th Ave
Aloha OR 97006

Magic Merlin Energy
Investment
6210 N 52nd Place
Paradise Valley AZ 85253

Kip Pursell
1820 Calle Del Vista NW
Albuquerque, NM 87105

Blue Ridge Energy LLC
P O Box 26567
Phoenix AZ 85068

Dave Wingo
966 E Hope St
Mesa, AZ 85203

Crosswind Resources L L C
931 S Lagoon Drive
Gilbert, AZ 85233

Peter Balog Trustee of the
Balog Family Trust dated 8/15/2002
25812 South Danford Drive
Sun Lake, AZ 85248

M Code LLC
5744 E Joshua Tree Lane
Paradise Valley AZ 85253

Gross Family Ltd Partnership
P O Box 358
Roswell, NM 88202

RJ Fortune Investment LLC
9290 E Thompson Peak Pkwy,
Unit 257
Scottsdale, AZ 85255

Beachbums Energy, LLC
7920 E Thompson Peak Pkwy
Ste 150
Scottsdale, AZ 85255

Bane Biggle
P O Box 998
Armore, OK 73402

**BC OPERATING INC
AMENDED SOUTHERN COMFORT 2H**

J and J Energy, LLC
405 W Franklin St
Tucson, AZ 85701

BF Energy, LLC
c/o Randal Bunn
3504 S Claremont Ave
Paradise Valley AZ 85253

Slash Four Enterprises, Inc
P O Box 1433
Roswell, NM 88202

Gunn Family Properties, LTD
P O Box 1298
Graham TX 76450

Paisano Partners
6654 S Cartier Dr
Gilbert, AZ 85298

Louis J Hoffman
14614 N Kirkland Blvd, Suite
300
Scottsdale, AZ 85254

Carl A Morgan and Gwenetta
B Morgan
P O Box 1122
Artesia, NM 88221

Pecos Petroleum Engineering,
Inc
P O Box 2885
Roswell NM 88202

RCB Investments
4059 Latigo Lane
Roswell, NM 88201

Long LLC
36 State Street Ste 1900
Salt Lake City UT 84111

Candice and Dean Delleney
6019 Tonkwa Trail
Georgetown, TX 78628

Valorie F Walker Trustee of the
Jack V Walker Revocable Trust
UTA dated 5/21/1981
P O Box 102256
Anchorage AK 99510

Steven Engwall
2707 Duval
Dallas, TX 75211

Larry Engwall
1961 LaCuesta Dr
Santa Ana CA 92705

Primero Operating Inc
P O Box 1433
Roswell, NM 88202 1433

Jeffery T Scott
215 W Third St
Roswell NM 88201

Marvin C Gross
P O Box 358
Roswell NM 88202

Stovall Energy LTD
P O Box 10
Graham TX 76450

LML Working Properties LLC
P O Box 2094
Boulder CO 80307

Robert K Leonard
4212 Fairwood Drive
Midland TX 79707

JTD Resources
P O Box 3422
Midland, TX 79702

Donald Wenner
1606 SE Main
Roswell, NM 88203

OXY USA Inc
P O Box 50250
Midland, TX 79710

Mitchell Exploration Inc
6212 Homestead
Midland, TX 79707

Frank S Morgan & Robin L
Morgan
135 W Cottonwood Rd
Artesia, NM 88210

Strata Production Company
P O Box 1030
Roswell NM 88202

Murphy Petroleum Corporation
P O Box 2545
Roswell, NM 88202

**BC OPERATING INC
AMENDED SOUTHERN COMFORT 2H**

James K and Martha M Lusk
Trust
2717 Onate Dr
Roswell NM 88201

Mark L Shidler and wife,
Mitzi Shidler
1313 Campbell Rd Bldg D
Houston TX 77055

Kitchel Estate Exempt Trust
f/b/o Ward N Adkins, Jr
5519 Tupper Lake
Houston TX 77056

Zeus Petroleum, Inc
P O Box 458
Bellamy TX 77401

John Donnellan and wife, Gail
Donnellan
P O Box 1433
Chickasha OK 73023

Deseret Holding LLC
275 East South Temple Suite 250
Salt Lake City UT 84111

Brenda Waltrip
P O Box 546
Big Horn, WY 82833

James Schultz
1901 W 4th Street
Roswell NM 88201

Judah Oil LLC
P O BOX 568
ARTESIA NM 88210

Offsets

Judah Oil LLC
P O BOX 568
ARTESIA NM 88210

Matador Production Company
One Lincoln Centre
Dallas TX 75240

COG Production LLC
One Concho Center
600 W Illinois Avenue
Midland Texas 79701

We

7016 2070 0000 4815 3587

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For Delivery Information, visit **MHF/BC OP**
OFFIC AMENDE SOCO

Certified Mail Fee \$ 3.85

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$	<u>2.80</u>
<input type="checkbox"/> Return Receipt (electronic)	\$	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	
<input type="checkbox"/> Adult Signature Required	\$	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	

Postmark Here

Carl A Morgan and Gwenetta
 B Morgan
 P O Box 1122
 Artesia NM 88221

PS Form 3811, April 2015 PSN 7530-02 000 9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to
 Carl A Morgan and Gwenetta
 B Morgan
 P O Box 1122
 Artesia NM 88221

2 Article Number (Transfer from service label)
 9590 9401 0129 5225 0379 95

COMPLETE THIS SECTION ON DELIVERY

A Signature
 Agent
 Addressee

B Received by (Printed Name)
 Carl Morgan

C Date of Delivery
 12/15/2015

D Is delivery address different from item 1? Yes
 If YES enter delivery address below No

3 Service Type
 Adult Signature Priority Mail Express®
 Adult Signature Restricted Delivery Registered Mail™
 Certified Mail® Registered Mail Restricted Delivery
 Certified Mail Restricted Delivery Return Receipt for Merchandise
 Collect on Delivery Signature Confirmation
 Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

7016 2070 0000 4815 3587
 PS Form 3811 July 2015 PSN 7530-02 000 9053 Domestic Return Receipt

7016 2070 0000 4815 2863

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For Delivery Information, visit **MHF/BC OP**
PPOFFIC AMENDE SOCO

Certified Mail Fee \$ 3.85

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$	<u>2.80</u>
<input type="checkbox"/> Return Receipt (electronic)	\$	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	
<input type="checkbox"/> Adult Signature Required	\$	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	

Postmark Here

Judah Oil LLC
 P O BOX 568
 ARTESIA NM 88210

City State ZIP+4™

PS Form 3811, April 2015 PSN 7530-02 000 9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to
 Judah Oil LLC
 P O BOX 568
 ARTESIA NM 88210

2 Article Number (Transfer from service label)
 9590 9401 0129 5225 0301 89

COMPLETE THIS SECTION ON DELIVERY

A Signature
 Agent
 Addressee

B Received by (Printed Name)
 John Hammett

C Date of Delivery
 12/15/2015

D Is delivery address different from item 1? Yes
 If YES enter delivery address below No

3 Service Type
 Adult Signature Priority Mail Express®
 Adult Signature Restricted Delivery Registered Mail™
 Certified Mail® Registered Mail Restricted Delivery
 Certified Mail Restricted Delivery Return Receipt for Merchandise
 Collect on Delivery Signature Confirmation
 Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

7016 2070 0000 4815 2863
 PS Form 3811 July 2015 PSN 7530 02 000 9053 Domestic Return Receipt

7016 2070 0000 4815 3310

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **OFFICE** **MHF/BC OP**
AMENDED SOCO

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ <u>2.40</u>
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postmark Here

Postage

Crosswind Resources L L C
 931 S Lagoon Drive
 Gilbert AZ 85233

US Form 3800, April 2015 (SN 7520-02-000-17) See Reverse for Instructions

Returned

7016 2070 0000 4815 3464

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **OFFICE** **MHF/BC OP**
AMENDED SOCO

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ <u>2.40</u>
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postmark Here

Postage

Beachbums Energy, LLC
 7920 E Thompson Peak Pkwy
 Ste 150
 Scottsdale AZ 85255

US Form 3800, April 2015 (SN 7520-02-000-17) See Reverse for Instructions

7016 2070 0000 4815 3570

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit **MHF/BC OP**
OFFICE AMENDE SOCO

Certified Mail Fee \$

Extra Services & Fees (check box, add fees as appropriate)

Return Receipt (hardcopy) \$ 2.40

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postmark Here

Pecos Petroleum Engineering, Inc
P O Box 2885
Roswell, NM 88202

PS Form 3811, April 2015 PSN 7530-02 000 9053 See Reverse for Instructions

QUANTRO FIDELITY

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

1 Complete items 1, 2, and 3

Print your name and address on the reverse so that we can return the card to you

Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to

Pecos Petroleum Engineering Inc
P O Box 2885
Roswell NM 88202

2 Article Number (Transfer from service label)

9590 9401 0129 5225 0385 03

3 Service Type

Priority Mail Express®

Adult Signature

Registered Mail™

Adult Signature Restricted Delivery

Registered Mail Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Return Receipt for Merchandise

Collect on Delivery

Collect on Delivery Restricted Delivery

Signature Confirmation

Insured Mail

Mail Restricted Delivery

Restricted Delivery

A Signature

X *[Signature]*

Agent

Addressee

B Received by (Printed Name)

Stevan Thompson

C Date of Delivery

D Is delivery address different from item 1? Yes

If YES enter delivery address below No

ROSWELL, NM
DEC 16 2016

7016 2070 0000 4815 3570

PS Form 3811 July 2015 PSN 7530-02 000 9053 Domestic Return Receipt

7016 2070 0000 4815 3570

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit **MHF/BC OP**
OFFICE AMENDE SOCO

Certified Mail Fee \$

Extra Services & Fees (check box, add fees as appropriate)

Return Receipt (hardcopy) \$ 2.40

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postmark Here

Larry Engwall
1961 LaCuesta Dr
Santa Ana CA 92705

PS Form 3811, April 2015 PSN 7530-02 000 9053 See Reverse for Instructions

7016 2070 0000 4815 3754

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For Delivery Information, visit **MHF/BC OP OFFIC AMENDE SOCO**

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 3.25
 Return Receipt (electronic) \$ 2.70
 Certified Mail Restricted Delivery \$
 Adult Signature Req. Ir d \$
 Adult Signat re R strict d Delivery \$

Postmark Here

Robert K Leonard
 4212 Fairwood Drive
 Midland TX 79707

PS Form 3811, April 2015 PSN 7530 02 000 9053 See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3
 ■ Print your name and address on the reverse so that we can return the card to you
 ■ Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to
 Robert K Leonard
 4212 Fairwood Drive
 Midland TX 79707

2 Article Number (Transfer from service label)
 9590 9401 0129 5225 0383 29

3 Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation
 Signature Confirmation Restricted Delivery

COMPLETE THIS SECTION ON DELIVERY

A Signature
 X *Robert K Leonard* Agent Addressee

B Received by (Printed Name)
 C Date of Delivery
 12/2/16

D Is delivery address different from item 1? Yes No
 If YES enter delivery address below

PS Form 3811 July 2015 PSN 7530 02 000 9053 Domestic Return Receipt

7016 2070 0000 4815 3785

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For Delivery Information, visit **MHF/BC OP OFFIC AMENDE SOCO**

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 3.25
 Return Receipt (electronic) \$ 2.70
 Certified Mail Restricted Delivery \$
 Adult Signature Req. Ir d \$
 Adult Signature Restrict d Delivery \$

Postmark Here

Marvin C Gross
 P O Box 358
 Roswell, NM 88202

PS Form 3811, April 2015 PSN 7530 02 000 9053 See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3
 ■ Print your name and address on the reverse so that we can return the card to you
 ■ Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to
 Marvin C Gross
 P O Box 358
 Roswell NM 88202

2 Article Number (Transfer from service label)
 9590 9401 0129 5225 0383 50

3 Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation
 Signature Confirmation Restricted Delivery

COMPLETE THIS SECTION ON DELIVERY

A Signature
 X *M. C. Gross* Agent Addressee

B Received by (Printed Name)
 C Date of Delivery
 12/2/16

D Is delivery address different from item 1? Yes No
 If YES enter delivery address below

PS Form 3811 July 2015 PSN 7530 02 000 9053 Domestic Return Receipt

7016 2070 0000 4815 3761

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit usps.com

OFF MHF/BC OP
AMENDED SOCO

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hard copy)	\$ 2.40
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postmark Here

LML Working Properties LLC
 P O Box 3194
 Boulder CO 80307

PS Form 3800, April 2015 (5475) 2015-04-07 See Reverse for Instructions

7016 2070 0000 4815 3792

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit usps.com

OFF MHF/BC OP
AMENDED SOCO

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$ 2.40
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postmark Here

Jeffery T Scott
 215 W Third St
 Roswell, NM 88201

PS Form 3800, April 2015 (5475) 2015-04-07 See Reverse for Instructions

RETURNED



USPS Tracking®

Still Have Questions?

[Browse our FAQs >](#)



Get Easy Tracking Updates >
Sign up for My USPS

Tracking Number **7016207000048153761**

Updated Delivery Day **Wednesday December 21 2016**

Product & Tracking Information

Available Actions

Postal Product

Features
Certified Mail™

DATE TIME

STATUS

LOCATION

December 21 2016 12 27 pm

Delivered

BOULDER CO 80305

Click on the status to view details for this event

December 20 2016 1 35 pm

Available for Pickup

BOULDER CO 80307

December 20 2016 1 35 pm

Arrived at Unit

BOULDER CO 80305

December 20 2016 2 18 am

Departed USPS Facility

DENVER CO 80266

December 18 2016 5 33 pm

Arrived at USPS Facility

DENVER CO 80266

December 17 2016 11 43 pm

In Transit to Destination

December 17 2016 3 26 am

Departed USPS Facility

ALBUQUERQUE NM 87101

December 16 2016 11 43 pm

Arrived at USPS Facility

ALBUQUERQUE NM 87101

Track Another Package

Tracking (or receipt) number

Track It

Manage Incoming Packages

Track all your packages from a dashboard
No tracking numbers necessary

[Sign up for My USPS >](#)



7016 2070 0000 4815 3525

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information: **MHF/BC OP OFF AMENDED SOCO**

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$ 3.45
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$

Postage

Postmark Here
 DEC 19 2016

Steven Engwall
 2707 Duval
 Dallas TX 75211

PS Form 3811, April 2015 PSN 7530 02 000 9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1 Article Addressed to
 Steven Engwall
 2707 Duval
 Dallas TX 75211

2 Article Number (Transfer from service label)
 7016 2070 0000 4815 3525

COMPLETE THIS SECTION ON DELIVERY

A Signature
 Agent
 Addressee

B Received by (Printed Name)
 C Date of Delivery
 12-19-16

D Is delivery address different from item 1? Yes
 If YES enter delivery address below No

3 Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

PS Form 3811 July 2015 PSN 7530 02 000 9053 Domestic Return Receipt

7016 2070 0000 4815 3778

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information: **MHF/BC OP OFF AMENDED SOCO**

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$ 3.45
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$

Postage

Postmark Here
 DEC 19 2016

Stovall Energy LTD
 P O Box 10
 Graham, TX 76450

PS Form 3811, April 2015 PSN 7530 02 000 9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1 Article Addressed to
 Stovall Energy LTD
 P O Box 10
 Graham TX 76450

2 Article Number (Transfer from service label)
 7016 2070 0000 4815 3778

COMPLETE THIS SECTION ON DELIVERY

A Signature
 Agent
 Addressee

B Received by (Printed Name)
 C Date of Delivery
 LILA CLARKE
 DEC 19 2016

D Is delivery address different from item 1? Yes
 If YES enter delivery address below No

3 Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Priority Mail Express®
 Registered Mail
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

PS Form 3811 July 2015 PSN 7530 02 000 9053 Domestic Return Receipt

7016 2070 0000 4815 3532

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICE MHF/BC OF AMENDE SOCO

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hard copy) \$ 2.80

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Postmark Here

Valorie F Walker Trustee of the Jack V Walker Revocable Trust UTA dated 5/21/1981 P O Box 102256 Anchorage AK 99510

PS Form 3811, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1 Article Addressed to

Valorie F Walker Trustee of the Jack V Walker Revocable Trust UTA dated 5/21/1981 P O Box 102256 Anchorage AK 99510

2 Article Number (Transfer from service label)

7016 2070 0000 4815 3532

PS Form 3811 July 2015 PSN 7530-02-000-9053

THIS SECTION ON DELIVERY

A Signature Agent Addressee

X *V. Walker*

B Received by (Printed Name) C Date of Delivery

James Walker 12/21/16

D Is delivery address different from item 1? Yes No

If YES enter delivery address below

3 Service Type Priority Mail Express® Registered Mail™ Registered Mail Restricted Delivery Certified Mail® Return Receipt for Merchandise Signature Confirmation™ Signature Confirmation Restricted Delivery

Adult Signature Adult Signature Restricted Delivery Certified Mail® Certified Mail Restricted Delivery Collect on Delivery Collect on Delivery Restricted Delivery Insured Mail (Mail Restricted Delivery 00)

9590 9401 0129 5225 0380 39

Domestic Return Receipt

7016 2070 0000 4815 3532

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICE MHF/BC OF AMENDE SOCO

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hard copy) \$ 3.85

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Postmark Here

RCB Investments 4059 Latigo Lane Roswell NM 88201

PS Form 3811, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1 Article Addressed to

RCB Investments 1509 Latigo Lane Roswell NM 88201

2 Article Number (Transfer from service label)

7016 2070 0000 4815 3532

PS Form 3811 July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A Signature Agent Addressee

X *[Signature]*

B Received by (Printed Name) C Date of Delivery

Kim Cross 12/21/16

D Is delivery address different from item 1? Yes No

If YES enter delivery address below

3 Service Type Priority Mail Express® Registered Mail™ Registered Mail Restricted Delivery Certified Mail® Return Receipt for Merchandise Signature Confirmation™ Signature Confirmation Restricted Delivery

Adult Signature Adult Signature Restricted Delivery Certified Mail® Certified Mail Restricted Delivery Collect on Delivery Collect on Delivery Restricted Delivery Insured Mail (Mail Restricted Delivery 00)

9590 9401 0129 5225 0380 08

Domestic Return Receipt

7016 2070 0000 4815 3372

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit **OFF** **MHF/BC OP**
AMENDED SOCO

Certified Mail Fee \$ 3.85

Extra Services & Fees (check box, add fee as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ <u>2.80</u>
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark Here
 DEC 16 2016
 NM 87594

Levi Oil and Gas LLC
 P O Box 568
 Artesia NM 88211-0568

PS Form 3800, April 2015 PSN 7530-02-000-9057 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to

Levi Oil and Gas LLC
 P O Box 568
 Artesia NM 88211-0568

2 Article Number (Transfer from service label)

9590 9401 0129 5225 0377 11
 7016 2070 0000 4815 3372

COMPLETE THIS SECTION ON DELIVERY

A Signature John Phammet Agent Addressee

B Received by (Printed Name) John Phammet C Date of Delivery

D Is delivery address different from item 1? Yes No
 If YES enter delivery address below

3- Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Collect on Delivery	<input checked="" type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery

PS Form 3811 July 2015 PSN 7530-02 000 9053 Domestic Return Receipt

7016 2070 0000 4815 3549

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit **OFFIC** **MHF/BC OP**
AMENDED SOCO

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ <u>2.80</u>
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark Here
 DEC 16 2016
 TX 75194

Candice and Dean Dellene
 6019 Tonkwa Trail
 Georgetown TX 78628

PS Form 3800, April 2015 PSN 7530-02-000-9057 See Reverse for Instructions

RETURNED

7015 0640 0001 7532 4164

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

MHF/BC OP
AMENDED SOCO

For delivery information, visit **OFFIC**

Certified Mail Fee \$ 3.75

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.00

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

COG Acreage LP
 One Concho Center
 600 W Illinois Avenue
 Midland, Texas 79701

PS Form 3811, April 2015 PSN 7530-02-000-9053 See reverse for instructions

DEC 1 2015 Postmark Here

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

MHF/BC OP
AMENDED SOCO

For delivery information, visit **OFFIC**

Certified Mail Fee \$ 3.75

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.00

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Magic Merlin Energy Investment
 6210 N 52nd Place
 Paradise Valley AZ 85253

PS Form 3811, April 2015 PSN 7530-02-000-9053 See reverse for instructions

DEC 16 2015 Postmark Here

7016 2070 0000 4815 3358

RETURNED

1 Article Addressed to

COG Acreage LP
 One Concho Center
 600 W Illinois Avenue
 Midland Texas 79701

2 Article Number (Transfer from service label)

9590 9401 0129 5225 0376 29

COMPLETE THIS SECTION ON DELIVERY

A Signature
 x Andrea Arispe Agent Addressee

B. Received by (Printed Name) Andrea Arispe

C. Date of Delivery 12-11-16

D. Is delivery address different from item 1? Yes No
 If YES enter delivery address below

3 Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Return Receipt for Merchandise

Collect on Delivery Signature Confirmation

Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

7016 2070 0000 4815 3327

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

MHF/BC OP
AMENDED SOCO

For Delivery Information, Visit **OFFIC**

Certified Mail Fee
 \$ 345

Extra Services & Fees (check box, add fee as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hard copy)	\$ <u>280</u>
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark Here
 JUL 16 2016

Dave Wingo
 966 E Hope St
 Mesa AZ 85203

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

RETURNED

7016 2070 0000 4815 3334

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

MHF/BC OP
AMENDED SOCO

For Delivery Information, Visit **OFFIC**

Certified Mail Fee
 \$ 345

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hard copy)	\$ <u>280</u>
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage

Postmark Here
 DEC 16 2016

Blue Ridge Energy LLC
 P O Box 26567
 Phoenix, AZ 85068

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to
 Blue Ridge Energy LLC
 P O Box 26567
 Phoenix AZ 85068

RECIPIENT: COMPLETE THIS SECTION ON DELIVERY

A Signature
 Agent
 Addressee

B Received by (Printed Name) WINGO DAVE

C Date of Delivery

D Is delivery address different from item 1? Yes
 If YES, enter delivery address below

3 Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery

Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation
 Signature Confirmation Restricted Delivery

2 Article Number (Transfer from service label)
 9590 9401 0129 5225 0377 59

7016 2070 0000 4815 3334

PS Form 3811 July 2015 PSN 7530-02 000 9053 Domestic Return Receipt

7015 0640 0001 7532 4140

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

MHF/BC OP
 AMENDED SOCO

For delivery information, visit
OFFIC

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.00

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postmark Here

BB Management, LLC
 P O Box 80735
 Phoenix AZ 85060

PS Form 3800, April 2015 PSN 7530 02-000-9053 See Reverse for Instructions

7016 2070 0000 4815 3341

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

MHF/BC OP
 AMENDED SOCO

For delivery information, visit
OFFIC

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.00

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage

Postmark Here

Kip Purcell
 1820 Calle Del Vista NW
 Albuquerque, NM 87105

PS Form 3800, April 2015 PSN 7530 02-000-9053 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

Complete items 1, 2 and 3

Print your name and address on the reverse so that we can return the card to you

Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to
 BB Management LLC
 P O Box 80735
 Phoenix AZ 85060

2 Article Number (Transfer from service label)
 9590 9401 0129 5225 0376 43

3 Service Type

Adult Signature

Adult Signature Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Collect on Delivery

Collect on Delivery Restricted Delivery

Insured Mail

Priority Mail Express®

Registered Mail

Registered Mail Restricted Delivery

Return Receipt for Merchandise

Signature Confirmation

Signature Confirmation Restricted Delivery

Mail Restricted Delivery (0)

7015 0640 0001 7532 4140

PS Form 3811 July 2015 PSN 7530 02-000-9053 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee

B. Received by (Printed Name)
 E. Combs

C. Date of Delivery
 12/17

D. Is delivery address different from item 1? Yes
 If YES enter delivery address below No

3 Service Type

Adult Signature

Adult Signature Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Collect on Delivery

Collect on Delivery Restricted Delivery

Insured Mail

Priority Mail Express®

Registered Mail

Registered Mail Restricted Delivery

Return Receipt for Merchandise

Signature Confirmation

Signature Confirmation Restricted Delivery

Mail Restricted Delivery (0)

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

Complete items 1, 2 and 3

Print your name and address on the reverse so that we can return the card to you

Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to
 Kip Purcell
 1820 Calle Del Vista NW
 Albuquerque NM 87105

2 Article Number (Transfer from service label)
 9590 9401 0129 5225 0377 42

3 Service Type

Adult Signature

Adult Signature Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Collect on Delivery

Collect on Delivery Restricted Delivery

Insured Mail

Priority Mail Express®

Registered Mail™

Registered Mail Restricted Delivery

Return Receipt for Merchandise

Signature Confirmation

Signature Confirmation Restricted Delivery

Mail Restricted Delivery (0)

7016 2070 0000 4815 3341

PS Form 3811 July 2015 PSN 7530 02-000-9053 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee

B. Received by (Printed Name)
 Dylan Purcell

C. Date of Delivery
 19 Dec

D. Is delivery address different from item 1? Yes
 If YES enter delivery address below No

3 Service Type

Adult Signature

Adult Signature Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Collect on Delivery

Collect on Delivery Restricted Delivery

Insured Mail

Priority Mail Express®

Registered Mail™

Registered Mail Restricted Delivery

Return Receipt for Merchandise

Signature Confirmation

Signature Confirmation Restricted Delivery

Mail Restricted Delivery (0)

7016 2070 0000 4815 3365

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL MAIL MHF/BC OP AMENDEE SOCO

Certified Mail Fee \$
 Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$ 3.25
 Return Receipt (electronic) \$ 2.80
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$

Postmark Here
 DEC 16 2016

Billie J Michaud Trustee of the
 Billie J Michaud Revocable Living Trust dated 8/2/2006
 1157 SW 213th Ave
 Aloha OR 97006

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1 Article Addressed to
 Billie J Michaud Trustee of the
 Billie J Michaud Revocable Living Trust dated 8/2/2006
 1157 SW 213th Ave
 Aloha OR 97006

2 Article Number (Transfer from service label)
 7016 2070 0000 4815 3365

COMPLETE THIS SECTION ON DELIVERY

A Signature
 [Signature]
 Agent
 Addressee

B. Received by (Printed Name)
 Billie J Michaud

C Date of Delivery
 12/20/16

D Is delivery address different from item 1? If YES enter delivery address below
 Yes
 No

3 Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Insured Mail
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

PS Form 3811 July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7016 2070 0000 4815 3747

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL MAIL MHF/BC OP AMENDEE SOCO

Certified Mail Fee \$
 Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$ 2.70
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$

Postmark Here
 DEC 16 2016

JTD Resources
 P O Box 3422
 Midland TX 79702

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1 Article Addressed to
 JTD Resources
 P O Box 3422
 Midland TX 79702

2 Article Number (Transfer from service label)
 7016 2070 0000 4815 3747

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 [Signature]
 Agent
 Addressee

B. Received by (Printed Name)
 Debbie Gleason

C Date of Delivery
 DEC 9 2016

D Is delivery address different from item 1? If YES enter delivery address below
 Yes
 No

3 Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Insured Mail
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

PS Form 3811 July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7016 2070 0000 4815 3389

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **OFFICIAL**

MHF/BC OP
AMENDED SOCO

Certified Mail Fee
 \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.10

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage

Postmark Here

Catalyst Energy LLC
 10219 S 16th Ave
 Phoenix AZ 85041

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

RETURNED

7015 0640 0001 7532 4133

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **OFFICIAL**

MHF/BC OP
AMENDED SOCO

Certified Mail Fee
 \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.10

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postmark Here

Jim Whitehead Oil & Gas, LLC
 651 North Sky View St
 Flagstaff, AZ 86004

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1 Article Addressed to

Jim Whitehead Oil & Gas LLC
 651 North Sky View St
 Flagstaff AZ 86004

2 Article Number (Transfer from service label)
 9590 9401 0129 5225 0376 50

3 Service Type

Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Insured Mail

Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

COMPLETE THIS SECTION ON DELIVERY

A Signature
 Missy Whitehead Agent
 Addressee

B Received by (Printed Name)
 Missy Whitehead

C Date of Delivery
 12-22-16

D Is delivery address different from item 1? Yes
 If YES enter delivery address below No

Mail Restricted Delivery (X)

PS Form 3811 July 2015 PSN 7530-02-000 9053 Domestic Return Receipt

7015 0640 0001 7532 4126

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

MHF/BC OP
 AMENDED SOCO

For delivery information, visit **OFFICIAL**

1 Article Addressed to
BID Group LLC
P O Box 5045
Scottsdale, AZ 85261

2 Article Number (Transfer from service label) **7015 0640 0001 7532 4126**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Certified Mail Fee \$ **3.45**

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ **2.80**

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postmark Here **7015 0640**

7016 2070 0000 4815 3426

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

MHF/BC OP
 AMENDED SOCO

For delivery information, visit **OFFICIAL**

1 Article Addressed to
Slash Four Enterprises Inc
P O Box 1433
Roswell, NM 88202

2 Article Number (Transfer from service label) **7016 2070 0000 4815 3426**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Certified Mail Fee \$ **3.45**

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ **2.80**

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage **375.34**

Postmark Here **DEC 16 2015**

CERTIFIED MAIL

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to
BID Group LLC
P O Box 5045
Scottsdale AZ 85261

2 Article Number (Transfer from service label) **7015 0640 0001 7532 4126**

PS Form 3811 July 2015 PSN 7530-02 000 9053

COMPLETE THIS SECTION ON DELIVERY

A Signature **[Signature]** Agent Addressee

B Received by (Printed Name) **R. H. LOAS Smith** C Date of Delivery **12-19-16**

D Is delivery address different from item 1? Yes No

3 Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Return Receipt for Merchandise

Collect on Delivery Signature Confirmation

Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

Insured Mail Signature Confirmation Restricted Delivery

Mail Restricted Delivery

Return Receipt

CERTIFIED MAIL

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to
Slash Four Enterprises Inc
P O Box 1433
Roswell NM 88202

2 Article Number (Transfer from service label) **7016 2070 0000 4815 3426**

PS Form 3811 July 2015 PSN 7530-02 000-9053

COMPLETE THIS SECTION ON DELIVERY

A Signature **[Signature]** Agent Addressee

B Received by (Printed Name) **Alicia Caporaso** C Date of Delivery **2016**

D Is delivery address different from item 1? Yes No

3 Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Return Receipt for Merchandise

Collect on Delivery Signature Confirmation

Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

Insured Mail Signature Confirmation Restricted Delivery

Mail Restricted Delivery

Domestic Return Receipt

7015 0640 0001 7532 4171

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

MHF/BC OP
AMENDED SOCO

For delivery information, visit **OFFIC**

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.80

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postmark Here

Postage

COG Production LLC
One Concho Center
600 W Illinois Avenue
Midland, Texas 79701

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7015 0640 0001 7532 4188

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

MHF/BC OP
AMENDED SOCO

For delivery information, visit **OFFIC**

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.80

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postmark Here

Postage

Occidental Permian Limited Partnership
P O Box 50250
Midland Texas 79710

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

SENDER: COMPLETE THIS SECTION

1 Article Addressed to

COG Production LLC
One Concho Center
600 W Illinois Avenue
Midland Texas 79701

2 Article Number (Transfer from service label)

7015 0640 0001 7532 4171

PS Form 3811 July 2015 PSN 7530-02 000-9053

HIS SECTION ON DELIVERY

A Signature

Andrea Arispe Agent Addressee

B Received by (Printed Name) **Andrea Arispe** C Date of Delivery **12-14-16**

D Is delivery address different from item 1? Yes No

3 Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Return Receipt for Merchandise

Collect on Delivery Signature Confirmation™

Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

SENDER: COMPLETE THIS SECTION

1 Article Addressed to

Occidental Permian Limited Partnership
P O Box 50250
Midland Texas 79710

2 Article Number (Transfer from service label)

7015 0640 0001 7532 4188

PS Form 3811 July 2015 PSN 7530-02 000 9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Richard Nelson Agent Addressee

B Received by (Printed Name) **Richard Nelson** C Date of Delivery **12/20/16**

D Is delivery address different from item 1? Yes No

3 Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Return Receipt for Merchandise

Collect on Delivery Signature Confirmation™

Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

Domestic Return Receipt

7015 0640 0001 7532 4119

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, **MHF/BC OP**
OFFI **AMENDEDO SOCO**

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$ 3.45
 Return Receipt (electronic) \$ _____
 Certified Mail Restricted Delivery \$ _____
 Adult Signature Required \$ _____
 Adult Signature Restricted Delivery \$ _____

Postmark Here
 DEC 16 2016

Permian Basin Investment Corporation
 1451 S Miami Ave Apt 3604
 Miami FL 33130

PS Form 3811, April 2015 PSN 7530-02-000 9053 See Reverse for Instructions

Returned

7015 0640 0001 7532 4201

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, **MHF/BC OP**
OFFI **AMENDEDO SOCO**

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$ 3.45
 Return Receipt (electronic) \$ _____
 Certified Mail Restricted Delivery \$ _____
 Adult Signature Required \$ _____
 Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Postmark Here
 DEC 16 2016

Stillwater Investments
 6403 Sequoia
 Midland Texas 79707

PS Form 3811, April 2015 PSN 7530-02-000 9053 See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

SENDER: _____

■ Complete items 1, 2, and 3
 ■ Print your name and address on the reverse so that we can return the card to you
 ■ Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to
 Stillwater Investments
 6403 Sequoia
 Midland Texas 79707

2 Article Number (Transfer from service label)
 7015-0640 0001 7532 4201

3 Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Insured Mail
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation
 Signature Confirmation Restricted Delivery

4 ACTION ON DELIVERY
 A Signature
 Agent
 Addressee
 B Received by (Printed Name)
 L M P W T E O P I K R
 C Date of Delivery
 12 19 16
 D Is delivery address different from item 1? Yes
 If YES enter delivery address below No

9590 9401 0129 5225 0379 7J

PS Form 3811 July 2015 PSN 7530-02-000 9053 Domestic Return Receipt

7015 0640 0001 7532 4195

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

MHF/BC OP
 AMENDE SOCO
 OFFICI

For delivery information, visit [usps.com](#)

Certified Mail Fee \$ 345
 Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$ 280
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$

Murchison Oil and Gas, Inc
 7250 Dallas Pkwy #1400
 Plano, TX 75024

DEC 16 2016
 Postmark Here

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to
 Murchison Oil and Gas Inc
 7250 Dallas Pkwy #1400
 Plano TX 75024

2 Article Number (Transfer from service label)
 9590 9401 0129 5225 0379 64

PS Form 3811 July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 x Elaine Peveto Agent Addressee

B. Received by (Printed Name)
 Elaine Peveto

C. Date of Delivery
 12-19-16

D. Is delivery address different from item 1? Yes No
 If YES enter delivery address below

3 Service Type
 Adult Signature Priority Mail Express®
 Adult Signature Restricted Delivery Registered Mail™
 Certified Mail® Registered Mail Restricted Delivery
 Certified Mail Restricted Delivery Return Receipt for Merchandise
 Collect on Delivery Signature Confirmation™
 Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery
 Mail Restricted Delivery (10) Restricted Delivery

Domestic Return Receipt

7016 2070 0000 4615 3679

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

MHF/BC OP
 AMENDE SOCO
 OFFICI

For delivery information, visit [usps.com](#)

Certified Mail Fee \$ 345
 Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$ 280
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$

James K and Martha M Lusk
 Trust
 2717 Onate Dr
 Roswell, NM 88201

DEC 1 2016
 Postmark Here

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

RETURNED

7016 2070 0000 4815 2870

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information: **MHF/BC OP**
OFFI **AMENDED SOCO PP**

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ <u>2.70</u>
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage

James Schultz
 1901 W 4th Street
 Roswell NM 88201

PS Form 3811, April 2015 PSN 7530-02-000-9057 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to

James Schultz
 1901 W. 4th Street
 Roswell NM 88201

9590 9401 0129 5225 0381 76

2 Article Number (Transfer from service label)

7016 2070 0000 4815 2870

PS Form 3811 July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A Signature
 Agent
 Addressee

X *Pamela M Schultz*

B Received by (Printed Name) *Pamela M Schultz* C Date of Delivery *12-20-16*

D Is delivery address different from item 1? Yes
 If YES enter delivery address below No

3 Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Collect Delivery	<input type="checkbox"/> Signature Confirmation
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Insured Mail Restricted Delivery	

7016 2070 0000 4815 3433

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information: **MHF/BC OP**
OFFI **AMENDED SOCO**

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ <u>2.70</u>
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage

BF Energy LLC
 c/o Randal Bunes
 3504 E, Claremont Ave
 Paradise Valley, AZ 85253

PS Form 3811, April 2015 PSN 7530-02-000-9057 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to

BF Energy LLC
 c/o Randal Bunes
 3504 E Claremont Ave
 Paradise Valley AZ 85253

9590 9401 0129 5225 0378 72

2 Article Number (Transfer from service label)

7016 2070 0000 4815 3433

PS Form 3811 July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A Signature
 Agent
 Addressee

X *Randal Bunes*

B Received by (Printed Name) *Randal Bunes* C Date of Delivery *12-29-16*

D Is delivery address different from item 1? Yes
 If YES enter delivery address below No

3 Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Collect Delivery	<input checked="" type="checkbox"/> Signature Confirmation
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Insured Mail Restricted Delivery	

7015 0640 0001 7532 4157

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **OFFICIAL**

MHF/BC OP AMENDED SOCO

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.40

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postmark Here

Thomas Family Limited Partnership
 P O Box 80123
 Phoenix AZ 85060

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to
 Thomas Family Limited Partnership
 P O Box 80123
 Phoenix, AZ 85060

2 Article Number (Transfer from service label)
 9590 9401 0129 5225 0376 36

3 Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Mail Restricted Delivery

COMPLETE THIS SECTION ON DELIVERY

A Signature
 X *[Signature]* Agent Addressee

B Received by (Printed Name)
 E Thomas

C Date of Delivery
 12/21

D Is delivery address different from item 1? Yes No
 If YES enter delivery address below

PS Form 3811 July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7016 2070 0000 4815 3396

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **OFFICIAL**

MHF/BC OP AMENDED SOCO

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.40

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postmark Here

Centennial
 P O Box 1834
 Roswell NM 88202

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to
 Centennial
 P O Box 1834
 Roswell NM 88202

2 Article Number (Transfer from service label)
 9590 9401 0129 5225 0376 98

3 Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Mail Restricted Delivery

COMPLETE THIS SECTION ON DELIVERY

A Signature
 X *[Signature]* Agent Addressee

B Received by (Printed Name)
 SHERRILL SCOTT

C Date of Delivery
 DEC 20 2016

D Is delivery address different from item 1? Yes No
 If YES enter delivery address below

PS Form 3811 July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

RETURNED

7016 2070 0000 4815 3594

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website: www.usps.com

OFFICE MHF/BC OP
 AMENDE SOCO

Certified Mail Fee \$ 3.00

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.50

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postmark Here: **DEC 16 2015** DEVA

Louis J Hoffman
 14614 N Kirkland Blvd Suite 300
 Scottsdale, AZ 85254

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7016 2070 0000 4815 3402

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information: www.usps.com

OFFICE MHF/BC OP
 AMENDE SOCO

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.50

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postmark Here: **DEC 16 2015** DEVA

L T Capital LLC
 P O Box 80735
 Phoenix AZ 85060

City State ZIP+4 _____

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1 Article Addressed to

L T Capital LLC
 P O Box 80735
 Phoenix AZ 85060

9590 9401 0129 5225 0376 81

2 Article Number (Transfer from service label)

7016 2070 0000 4815 3402

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

B. Received by (Printed Name) E. Ross

C. Date of Delivery 12/27

D. Is delivery address different from item 1? Yes No

3 Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Return Receipt for Merchandise

Collect on Delivery Signature Confirmation

Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

PS Form 3811 July 2015 PSN 7530-02 000-9053 Domestic Return Receipt

7016 2070 0000 4815 3457

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For Delivery Information, visit **MHF/BC OP**
OFF **AMENDES SOCO**

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 2.10
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postmark Here **9 12 2015**

Bane Bigbie
 P O Box 998
 Ardmore OK 73402

PS Form 3811, April 2015 PSN 7530-02-000 9053 See Reverse for Instructions

7016 2070 0000 4815 3600

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For Delivery Information, visit **MHF/BC OP**
OFFIC **AMENDES SOCO**

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 2.10
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postmark Here **5 20 2015**

Paisano Partners
 6654 S Cartier Dr
 Gilbert AZ 85298

PS Form 3811, April 2015 PSN 7530-02-000 9053 See Reverse for Instructions

U.S. POSTAL SERVICE™
SENDER COMPLETE THIS SECTION ON DELIVERY

Complete items 1 2 and 3
 Print your name and address on the reverse so that we can return the card to you
 Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to
 Bane Bigbie
 P O Box 998
 Ardmore OK 73402

2 Article Number (Transfer from)
 4590 9401 0129 5225 0378 65
 7016 2070 0000 4815 3457

3 Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery (over \$500)

A Signature
 [Signature]
 Agent
 Addressee

B Received by (Printed Name)
 JOHNNIE RYLEN

C Date of Delivery
 [Stamp]

D Is delivery address different from item 1? Yes
 If YES enter delivery address below No

PS Form 3811 July 2015 PSN 7530-02-000 9053 Domestic Return Receipt

Returned

7016 2070 0000 4815 3495

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information visit **MHF/BC OP**
OFFI AMENDED SOCO

Certified Mail Fee \$ 345

Extra Services & Fees (check box, add fee as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hard copy)	\$ <u>2.80</u>
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postmark Here

M Code LLC
 5744 E Joshua Tree Lane
 Paradise Valley, AZ 85253

US Form 3800, April 2015 (SN 7531-02-00-0147) See Reverse for Instructions

7016 2070 0000 4815 3501

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information visit **MHF/BC OP**
OFFIC AMENDED SOCO

Certified Mail Fee \$ 345

Extra Services & Fees (check box, add fee as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ <u>2.80</u>
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postmark Here

Peter Balog Trustee of the
 Balog Family Trust dated 8/15/2002
 25812 South Danford Drive
 Sun Lake AZ 85248

US Form 3800, April 2015 (SN 7531-02-00-0147) See Reverse for Instructions

7016 2070 0000 4815 3471

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information
OFFICIAL

MHF/BC OP
 AMENDED SOCO

Certified Mail Fee
 \$ 3.85

Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$ 2.80
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$

RJ Fortune Investments LLC
 9290 E Thompson Peak Pkwy
 Unit 257
 Scottsdale AZ 85255

Postmark Here

PS Form 3800, April 2015 PSN 7530-02-000-9057 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1 Article Addressed to
 RJ Fortune Investments LLC
 9290 E Thompson Peak Pkwy
 Unit 257
 Scottsdale AZ 85255

2 Article Number (Transfer from service label)
 9590 9401 0129 5225 0378 34

3 Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Insured Mail
 Priority Mail Express®
 Registered Mail
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation
 Signature Confirmation Restricted Delivery

4 Signature Confirmation Restricted Delivery

PS Form 3811 July 2015 PSN 7530 02 000-9053 Domestic Return Receipt

7016 2070 0000 4815 3488

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information
OFFICIAL

MHF/BC OP
 AMENDED SOCO

Certified Mail Fee
 \$ 3.85

Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hard copy) \$ 2.80
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$

Gross Family Ltd Partnership
 P O Box 358
 Roswell NM 88202

Postmark Here

PS Form 3800, April 2015 PSN 7530-02-000-9057 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1 Article Addressed to
 Gross Family Ltd Partnership
 P O Box 358
 Roswell NM 88202

2 Article Number (Transfer from service label)
 9590 9401 0129 5225 0378 03

3 Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Insured Mail
 Priority Mail Express®
 Registered Mail
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation
 Signature Confirmation Restricted Delivery

4 Signature Confirmation Restricted Delivery

PS Form 3811 July 2015 PSN 7530-02 000 9053 Domestic Return Receipt

7016 2070 0000 4815 3631

U.S. Postal Service
CERTIFIED MAIL® RECEIPT

Domestic Mail Only

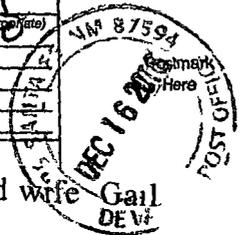
For delivery information, visit

MHF/BC OP
AMENDED SOCO

OFFIC

Certified Mail Fee

\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 3.50
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$



John Donnellan and wife Gail
Donnellan
P O Box 1433
Chickasha OK 73023

PS Form 3800, April 2015 PSN 7530 02 000 9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1 2 and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to

John Donnellan and wife Gail
Donnellan
P O Box 1433
Chickasha OK 73023

2 Article Number (Transfer from service label)

9590 9401 0129 5225 0382 06
7016 2070 0000 4815 3631

PS Form 3811 July 2015 PSN 7530 02 000 9053

COMPLETE THIS SECTION ON DELIVERY

A Signature

X *John E Donnellan* Agent Addressee

B Received by (Printed Name)

John E Donnellan

C Date of Delivery

12/19/16

D Is delivery address different from item 1? Yes No
If YES enter delivery address below

3 Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Priority Mail Express®
- Registered Mail
- Registered Mail Restricted Delivery
- Return Receipt to Merchandise
- Signature Confirmation
- Signature Confirmation Restricted Delivery
- Mail Restricted Delivery

SENDER: COMPLETE THIS SECTION

- Complete items 1 2 and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to

Gunn Family Properties LTD
P O Box 1298
Graham, TX 76450

2 Article Number (Transfer from service label)

9590 9401 0129 5225 0378 10
7016 2070 0000 4815 3419

PS Form 3811 July 2015 PSN 7530 02 000 9053

COMPLETE THIS SECTION ON DELIVERY

A Signature

X *Mary Alice Gunn* Agent Addressee

B Received by (Printed Name)

Mary Alice Gunn

C Date of Delivery

12/19/16

D Is delivery address different from item 1? Yes No
If YES enter delivery address below

3 Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Priority Mail Express®
- Registered Mail
- Registered Mail Restricted Delivery
- Return Receipt to Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery
- Mail Restricted Delivery

PS Form 3811 July 2015 PSN 7530 02 000 9053

Domestic Return Receipt

7016 2070 0000 4815 3419

U.S. Postal Service
CERTIFIED MAIL® RECEIPT

Domestic Mail Only

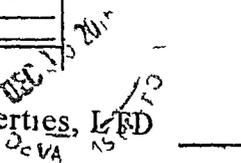
For delivery information, visit

MHF/BC OP
AMENDED SOCO

OFFI

Certified Mail Fee

\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 3.50
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$



Gunn Family Properties, LTD
P O Box 1298
Graham, TX 76450

PS Form 3800, April 2015 PSN 7530 02 000 9047 See Reverse for Instructions

7016 2070 0000 4815 3686

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit

OFFICE

MHF/BC OP
AMENDED SOCO

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.80

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postmark Here

Murphy Petroleum Corporation
P O Box 2545
Roswell NM 88202

PS Form 3800, April 2015 PSN 7530 02 000 9053 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE OR THE RIGHT SIDE OF THE MAILING LABEL

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to

Murphy Petroleum Corporation
P O Box 2545
Roswell NM 88202

9590 9401 0129 5225 0382 51

2 Article Number (Transfer from service label)

7016 2070 0000 4815 3686

PS Form 3811 July 2015 PSN 7530 02 000 9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

B. Received by (Printed Name) Erica de la Cruz

C. Date of Delivery DEC 16 2015

D. Is delivery address different from item 1? Yes No
If YES enter delivery address below

3 Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Return Receipt for Merchandise

Collect on Delivery Signature Confirmation®

Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

Domestic Return Receipt

7016 2070 0000 4815 3440

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit

OFFICE

MHF/BC OP
AMENDED SOCO

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.80

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postmark Here

J and J Energy LLC
405 W Franklin St
Tucson AZ 85701

PS SAN JUAN
DEC 16 2015
OFFICE
DE VA

PS Form 3800, April 2015 PSN 7530 02 000 9053 See Reverse for Instructions

RETURNED

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL MAIL MHF/BC OP AMENDED SOCO

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.50

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Postmark Here

Zeus Petroleum Inc
 P O Box 458
 Bellaire, TX 77401

PS Form 3800, April 2015 PSN 7530 02 000 9047 See Reverse for Instructions

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL MAIL MHF/BC OP AMENDED SOCO

Certified Mail Fee \$ 2.50

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.50

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Postmark Here

Mitchell Exploration, Inc
 6212 Homestead
 Midland, TX 79707

PS Form 3800, April 2015 PSN 7530 02 000 9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to

Zeus Petroleum Inc
 P O Box 458
 Bellaire TX 77401

9590 9401 0129 5225 0382 13

2 Article Number (Transfer from service label)

7016 2070 0000 4815 3648

PS Form 3811 July 2015 PSN 7530 02 000 9053

COMPLETE THIS SECTION ON DELIVERY

A Signature Agent Addressee

X *[Signature]*

B Received by (Printed Name) *Re. [Signature]*

C Date of Delivery *12-21-16*

D Is delivery address different from item 1? Yes No

If YES enter delivery address below

3 Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Return Receipt for Merchandise

Collect on Delivery Signature Confirmation

Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

Insured Mail Mail Restricted Delivery (0)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to

Mitchell Exploration Inc
 6212 Homestead
 Midland TX 79707

9590 9401 0129 5225 0382 82

2 Article Number (Transfer from service label)

7016 2070 0000 4815 3716

PS Form 3811 July 2015 PSN 7530 02 000 9053

COMPLETE THIS SECTION ON DELIVERY

A Signature Agent Addressee

X *[Signature]*

B Received by (Printed Name) *STEPHANT MITCHELL*

C Date of Delivery *12/21/16*

D Is delivery address different from item 1? Yes No

If YES enter delivery address below

3 Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Return Receipt for Merchandise

Collect on Delivery Signature Confirmation

Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

Insured Mail Mail Restricted Delivery (0)

Domestic Return Receipt

7016 2070 0000 4815 3662

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **MHF/BC OP OFFICI AMENDE SOCO**

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.00

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postmark Here

Mark L Shidler and wife
 Mitzi Shidler
 1313 Campbell Rd, Bldg D
 Houston, TX 77055

PS Form 3800, April 2015 PSN 7530-02-000-9037 See Reverse for Instructions

CERTIFIED MAIL

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

COMPLETE THIS SECTION ON DELIVERY

1 Complete items 1, 2, and 3

2 Print your name and address on the reverse so that we can return the card to you

3 Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to
 Mark I Shidler and wife
 Mitzi Shidler
 1313 Campbell Rd Bldg D
 Houston TX 77055

A Signature
 Agent
 Addressee

B Received by (Printed Name)
 C Date of Delivery
 12/20/16

D Is delivery address different from item 1? Yes
 If YES enter delivery address below No

3 Service Type
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

9590 9401 0129 5225 0382 37

2 Article Number (Transfer from service label)
 7016 2070 0000 4815 3662

PS Form 3811 July 2015 PSN 7530 02 000 9053 Domestic Return Receipt

7016 2070 0000 4815 3723

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **MHF/BC OP OFFICI AMENDE SOCO**

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.00

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postmark Here

OXY USA Inc
 P O Box 50250
 Midland TX 79710

PS Form 3800, April 2015 PSN 7530-02-000-9037 See Reverse for Instructions

CERTIFIED MAIL

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

1 Complete items 1, 2, and 3

2 Print your name and address on the reverse so that we can return the card to you

3 Attach this card to the back of the mailpiece, or on the front if space permits

1 Article Addressed to
 OXY USA Inc
 P O Box 50250
 Midland TX 79710

COMPLETE THIS SECTION ON DELIVERY

A Signature
 Agent
 Addressee

B Received by (Printed Name)
 C Date of Delivery
 Ashland Mason 12/20/16

D Is delivery address different from item 1? Yes
 If YES enter delivery address below No

3 Service Type
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

9590 9401 0129 5225 0382 99

2 Article Number (Transfer from service label)
 7016 2070 0000 4815 3723

PS Form 3811 July 2015 PSN 7530 02 000 9053 Domestic Return Receipt

7016 2070 0000 4815 3655

U.S. Postal Service[™]
CERTIFIED MAIL[®] RECEIPT
 Domestic Mail Only MHF/BC OP
 For delivery information, visit **AMENDED SOCO OFFIC**

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$ 2.80
 Return Receipt (electronic) \$ _____
 Certified Mail Restricted Delivery \$ _____
 Adult Signature Required \$ _____
 Adult Signature Restricted Delivery \$ _____

Postmark Here
 SAN ANTONIO TX 78201
 DEC 16 2015

Postmark Here
 SAN ANTONIO TX 78201
 DEC 16 2015

Kitchel Estate Exempt Trust
 f/b/o Ward N Adkins, Jr
 5519 Tupper Lake
 Houston TX 77056

PS Form 3811, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to
 Kitchel Estate Exempt Trust
 f/b/o Ward N Adkins Jr
 5519 Tupper Lake
 Houston TX 77056

2 Article Number (Transfer from service label)
 9590 9401 0129 5225 0382 20
 7016 2070 0000 4815 3655

3 Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Insured Mail
 Registered Mail[™]
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation[™]
 Signature Confirmation Restricted Delivery

COMPLETE THIS SECTION ON DELIVERY

A Signature
 X W Adkins Agent Addressee

B Received by (Printed Name)
W Adkins

C Date of Delivery
12-19-16

D Is delivery address different from item 1? Yes No
 If YES enter delivery address below

PS Form 3811 July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7016 2070 0000 4815 3709

U.S. Postal Service[™]
CERTIFIED MAIL[®] RECEIPT
 Domestic Mail Only MHF/BC OP
 For delivery information, visit **AMENDED SOCO OFFIC**

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$ 2.80
 Return Receipt (electronic) \$ _____
 Certified Mail Restricted Delivery \$ _____
 Adult Signature Required \$ _____
 Adult Signature Restricted Delivery \$ _____

Postmark Here
 SAN ANTONIO TX 78201
 DEC 16 2015

Postmark Here
 SAN ANTONIO TX 78201
 DEC 16 2015

Frank S Morgan & Robin L Morgan
 135 W Cottonwood Rd
 Artesia NM 88210

PS Form 3811, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to
 Frank S Morgan & Robin L Morgan
 135 W Cottonwood Rd
 Artesia NM 88210

2 Article Number (Transfer from service label)
 9590 9401 0129 5225 0382 75
 7016 2070 0000 4815 3709

3 Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail[®]
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Insured Mail
 Registered Mail[™]
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation[™]
 Signature Confirmation Restricted Delivery

COMPLETE THIS SECTION ON DELIVERY

A Signature
 X Frank Morgan Agent Addressee

B Received by (Printed Name)
Frank Morgan

C Date of Delivery
12-19-16

D Is delivery address different from item 1? Yes No
 If YES enter delivery address below

PS Form 3811 July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7016 2070 0000 4815 3693

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **OFFIC** **MHF/BC OP AMENDED SOCO**

Certified Mail Fee \$ 3.95

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.80

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage _____

Strata Production Company
 P O Box 1030
 Roswell, NM 88202

PS Form 3800, April 2015 PSN 7530-02-000-9057 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1 Complete items 1, 2, and 3

2 Print your name and address on the reverse so that we can return the card to you

3 Attach this card to the back of the mailpiece or on the front if space permits

Strata Production Company
 P O Box 1030
 Roswell NM 88202

9590 9401 0129 5225 0382 68

2 Article Number (Transfer from service label)
 7016 2070 0000 4815 3693

PS Form 3811 July 2015 PSN 7530 02 000 9053 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A Signature *[Signature]* Agent Addressee

B Received by (Printed Name) *[Signature]* C Date of Delivery 12/15/16

D Is delivery address different from item 1? Yes No
 If YES enter delivery address below _____

3 Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Return Receipt for Merchandise

Collect on Delivery Signature Confirmation™

Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

Insured Mail (Mail Restricted Delivery 100)

7016 2070 0000 4815 3617

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **OFFIC** **MHF/BC OP AMENDED SOCO**

Certified Mail Fee \$ 3.95

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.80

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage _____

Brenda Waltrip
 P O Box 746
 Big Horn WY 82833

PS Form 3800, April 2015 PSN 7530-02-000-9057 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1 Complete items 1, 2, and 3

2 Print your name and address on the reverse so that we can return the card to you

3 Attach this card to the back of the mailpiece or on the front if space permits

Brenda Waltrip
 P O Box 746
 Big Horn WY 82833

9590 9401 0129 5225 0381 83

2 Article Number (Transfer from service label)
 7016 2070 0000 4815 3617

PS Form 3811 July 2015 PSN 75 0 02 000-9053 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A Signature *[Signature]* Agent Addressee

B Received by (Printed Name) *[Signature]* C Date of Delivery 2/19/16

D Is delivery address different from item 1? Yes No
 If YES enter delivery address below _____

3 Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Return Receipt for Merchandise

Collect on Delivery Signature Confirmation™

Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

Insured Mail (Mail Restricted Delivery 100)

7016 2070 0000 4815 3624

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL AMENDED SOCO

Certified Mail Fee
 \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ <u>2.10</u>
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark Here
 DEC 15 2015

Deseret Holding LLC
 275 East South Temple Suite 250
 Salt Lake City UT 84111

PS Form 3800, April 2015 PSN 7530 02 000 9047 See Reverse for Instructions

7016 2070 0000 4815 3730

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL AMENDED SOCO

Certified Mail Fee
 \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ <u>2.10</u>
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark Here
 DEC 15 2015

Donald Wenner
 1606 SE Main
 Roswell NM 88203

PS Form 3800, April 2015 PSN 7530 02 000 9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to

Donald Wenner
 1606 SE Main
 Roswell NM 88203

2 Article Number (Transfer from service label)

9590 9401 0129 5225 0383 05

7016 2070 0000 4815 3730

COMPLETE THIS SECTION ON DELIVERY

A Signature

[Signature]

Agent
 Addressee

B Received by (Printed Name)

C Date of Delivery

D Is delivery address different from item 1? Yes
 If YES enter delivery address below No

- 3 Service Type
- | | |
|------------------------------------------------------------------|---------------------------------------------------------------------|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input checked="" type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input checked="" type="checkbox"/> Signature Confirmation |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail | |
| <input type="checkbox"/> Mail Restricted Delivery | |

PS Form 3811 July 2015 PSN 7530 02 000 9053 Domestic Return Receipt

7016 2070 0000 4815 2856

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

MHF/BC OP
 AMENDED SOCO

For Delivery Information, visit www.usps.com

FOFA

Certified Mail Fee \$ 3.15

Extra Services & Fees (check box, add fee as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ <u>2.80</u>
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark Here

Judah Oil LLC
 P O BOX 568
 ARTESIA NM 88210

PS Form 3811, April 2015 PSN 7530-02 000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to

Judah Oil LLC
 P O BOX 568
 ARTESIA NM 88210

2 Article Number (Transfer from service label)

7016 2070 0000 4815 2856

PS Form 3811 July 2015 PSN 7530-02 000-9053

COMPLETE THIS SECTION ON DELIVERY

A Signature Agent Addressee

X *[Signature]*

B Received by (Printed Name) *[Signature]* C Date of Delivery

D Is delivery address different from item 1? Yes No
 If YES enter delivery address below

3 Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Collect on Delivery	<input checked="" type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Insured Mail	

9590 9401 0129 5225 0381 5C

7016 2070 0000 4815 2856

PS Form 3811 July 2015 PSN 7530-02 000-9053 Domestic Return Receipt

7016 2070 0000 4815 2849

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

MHF/BC OP
 AMENDED SOCO

For Delivery Information, visit www.usps.com

FOFA

Certified Mail Fee \$ 3.15

Extra Services & Fees (check box, add fee as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ <u>2.80</u>
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark Here

Matador Production Company
 One Lincoln Centre
 Dallas TX 75240

PS Form 3811, April 2015 PSN 7530-02 000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to

Matador Production Company
 One Lincoln Centre
 Dallas TX 75240

2 Article Number (Transfer from service label)

7016 2070 0000 4815 2849

PS Form 3811 July 2015 PSN 7530-02 000-9053

COMPLETE THIS SECTION ON DELIVERY

A Signature Agent Addressee

X *[Signature]*

B Received by (Printed Name) *[Signature]* C Date of Delivery

D Is delivery address different from item 1? Yes No
 If YES enter delivery address below

3 Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Collect on Delivery	<input checked="" type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Insured Mail	

9590 9401 0129 5225 0381 4S

7016 2070 0000 4815 2849

PS Form 3811 July 2015 PSN 7530-02 000-9053 Domestic Return Receipt

7016 2070 0000 4815 2832

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **OFOTC**

COG Production LLC
 One Concho Center
 600 W Illinois Avenue
 Midland Texas 79701

COG Production LLC
 One Concho Center
 600 W Illinois Avenue
 Midland Texas 79701

PS Form 3811, April 2015 PSN 7530 02 000 9053. See reverse for instructions.

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece or on the front if space permits

1 Article Addressed to
COG Production LLC
One Concho Center
600 W Illinois Avenue
Midland, Texas 79701

2 Article Number (Transfer from service label)
7016 2070 0000 4815 2832

COMPLETE THIS SECTION ON DELIVERY

A Signature
 x *Andrea Anispe* Agent Addressee

B Received by (Printed Name)
Andrea Anispe

C Date of Delivery
12-19-16

D Is delivery address different from item 1? Yes No
 If YES, enter delivery address below

3 Service Type
 Adult Signature Priority Mail Express®
 Adult Signature Restricted Delivery Registered Mail™
 Certified Mail® Registered Mail Restricted Delivery
 Certified Mail Restricted Delivery Return Receipt for Merchandise
 Collect on Delivery Signature Confirmation
 Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery
 Inland Mail Signature Confirmation Restricted Delivery

PS Form 3811 J / 2015 PSN 7530 02 000 9053 Domestic Return Receipt